

## REGISTRATION: CANDIDATES/CANDIDATE COMMITTEE

OLYMPIA WA 98504-0908 (360) 753-1111	CANDIDATES/CANDIDAT	E COMMINITIEE		PDC OFFICE USE
Candidate's Name (Do not abbreviate, Include car	ndigate's full name)		<b>C1</b>	P M O A
- Thomas	L. Lodge		UI	S R T K
Candidate's Committee Name (Do not abbreviate.	)		(11/93)	E JUL 25 1996
Mailing Address	( d ) ( C d	<b>!</b> -		[ JUL 8 2 1996
City 1 1 City 1 1 S	6th St.	Zio	+4	-  <u>'</u>
VANCOUVER,	LIGRIC WA.		60	E
What office are you running for?	Legislative District, County or City	Position Na.		Do you now hold this office?
SUPERIOR	Count Judge			Yes No
2. Political party (if partisan office)	3. (	Date of general or special election		
4. How much do you plan to spend during yo	our entire election campaign, including the primary and g	general elections? Based on th	at estimate, choo	se one of the reporting options below.
If no box is checked you are obligate	ed to use Option III, Full Reporting. See instruction	manuals for information at	out reports req	uired and changing reporting options.
Option I MINI REPORTING In addition to my filing fee of \$9 including charges for the voters p aggregate from any contributor ex	70 , I will raise and spend no more than \$500, pamphlet. I will accept no more than \$200 in the xcept myself.		nd no more than ers pamphlet. I v	\$2,000, including my filing fee and vill accept no more than \$200 in the
Option III FULL REPORTING I will use the Full Reporting Syste	em. I understand frequent, detailed reports are			
required.	·	5. Campaign Telepi	none Number:	(360) 689 5417
O Towns of New York Address (Condidate To	by be treasurer.) (List deputy treasurers on attached sheet.)	Campaign Fax N	umber:	Daytime Telephone Number
6. Treasurer's Name and Address (Candidate ma				/
7. Committee's Principal Officers. List name, addr	MAMT O			
	established	inch		City
8. Campaign Bank or Depository 人	actable 1	(116)-1		J.,
Related or Affiliated Political Committees. List r	name, address and relationship.			
Street Address (Do not use a Post Office Boy I	nspection the last eight days before election. (Two hours daily b Number)			n and hours below: ours
40	in IN 30 ft SF			<del>-</del>
- / -	,0 00		ク・	5
VA	Nouvery WA 986	GD	7 -	
11. CERTIFICATION:	te and correct to the best of my knowledge.			
11. CERTIFICATION:				
11. CERTIFICATION: I certify that this report is true, complet				
11. CERTIFICATION: I certify that this report is true, complet Candidate's Signature	and instructions you need. Remember, candidates	Date	2 -	96-
11. CERTIFICATION: I certify that this report is true, complet Candidate's Signature  Please advise us about which forms a Statement (F-1) unless a current one	and instructions you need. Remember, candidates is aiready on file with PDC. Check all boxes which	Date	2 -	
11. CERTIFICATION: I certify that this report is true, complet Candidate's Signature  Please advise us about which forms a Statement (F-1) unless a current one  I already have financial affairs	and instructions you need. Remember, candidates is aiready on file with PDC. Check all boxes which and campaign disclosure forms and instructions.	Date Date s must file a Financial Affairs apply.	2 -	STRIBUTION OF THIS REPORT: RIGINAL — Public Disclosure Commission DPY — County Elections Dept. (Auditor)
11. CERTIFICATION: I certify that this report is true, complet Candidate's Signature  Please advise us about which forms a Statement (F-1) unless a current one  I already have financial affairs I am using Mini Reporting and, my Financial Affairs Statement	and instructions you need. Remember, candidates is aiready on file with PDC. Check all boxes which	Date Date s must file a Financial Affairs apply.	D O C	STRIBUTION OF THIS REPORT: RIGINAL — Public Disclosure Commission